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FROM Van Mahamedi

DATE 2005-05-10 21:38:50 GMT

RE 10/071,768 filing

COVER MESSAGE

Application No: 10/071,768

Filed: February 7, 2002

Confirmation Number 1636

Enclosed Herewith:

Response to Non-Final Office Action

Fee Transmittal With Authorization to Charge Deposit

Account 50-1914 if

necessary

Transmittal

Van Mahamedi

Partner

SHEMWELL GREGORY & COURTNEY LLP

(408) 551-6632 (Direct)

(408) 236-6641 (Fax)

4880 Stevens Creek Blvd.

Suite 201

San Jose, CA 95129

www.sgcpatentlaw.com

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

FEE TRANSMITTAL For FY 2005		Complete if Known	
		Application Number	10/071,768
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	February 7, 2002
		First Named Inventor	KWAN
TOTAL AMOUNT OF PAYMENT (\$) 0		Examiner Name	BORISSOV
		Art Unit	3629
		Attorney Docket No.	KWAN:P102

METHOD OF PAYMENT (check all that apply)

☐ Check
 ☐ Credit Card
 ☐ Money Order
 ☐ None
 ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 50-1914 Deposit Account Name: Shemwell Gregory & Courtin

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below
 ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17
 ☐ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims - 20 or HP = _____ x _____ = _____
 HP = highest number of total claims paid for, if greater than 20.
 Indep. Claims - 3 or HP = _____ x _____ = _____
 HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____	_____	_____	_____	_____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) _____ Fees Paid (\$)

Other (e.g., late filing surcharge): _____

SUBMITTED BY			
Signature	<u>[Signature]</u>	Registration No.	42,828
Name (Print/Type)	Van Mahamed	Telephone	408-551-6632
		Date	May 10, 2005

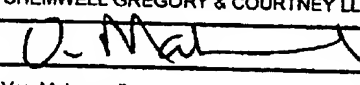
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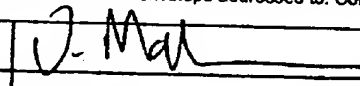
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PTO/SB/21 (09-04)
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TRANSMITTAL FORM	Application Number	10/071,768	
	Filing Date	February 7, 2002	
	First Named Inventor	KWAN, Edmund	
	Art Unit	3629	
	Examiner Name	BORISSOV, Igor	
(to be used for all correspondence after initial filing)		Attorney Docket Number	KWAN:P102
Total Number of Pages in This Submission		20	

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD <div style="border: 1px solid black; padding: 2px;">Remarks</div>	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	SHEMWELL GREGORY & COURTNEY LLP	
Signature		
Printed name	Van Mahamedi	
Date	May 10, 2005	Reg. No. 42,828

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:	
Signature	
Typed or printed name	Van Mahamedi
Date	May 10, 2005

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**IN THE
UNITED STATES PATENT AND TRADEMARK OFFICE**

APPLICANT: Kwan
APPLICATION NO.: 10/071,768
FILING DATE: February 7, 2002
TITLE: Billing Method and System for Collaboration Solutions
EXAMINER: Igor Borissov
ART UNIT: 3629

RESPONSE TO OFFICE ACTION

Sir:

In response to the Office Action of March 8, 2005, please accept the following amendment and consider the enclosed remarks.

Amendment to the Claims: Begins on Page 2 of this paper.

Remarks: Begins on 14

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